

# ITP 1 choice form

Instructions on how to fill in this form are provided on the back. More information about the ITP 1 choice is available in the ITP 1 pension choice brochure and on [www.avtalat.com](http://www.avtalat.com). If you do not wish to choose a company, or are satisfied with the company you have already chosen, go straight to section B and C. An empty form with only a signature is not valid! When you have completed the form, please send it to Avtalat, 103 76 Stockholm.

ITP 1

Personal Identity Number (yymmdd-nnnn):	Name:
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**A. Insurance provider** - When you make your choice for the first time you must always complete both stage 1 and 2. Put a cross in stage 1 and one or two crosses in stage 2.

Stage 1 - choose one alternative (for 50 % of your ITP)	Stage 2 - choose one or two alternatives (for the remaining 50 % of your ITP 1)		
Traditional insurance <input type="checkbox"/> Alecta <input type="checkbox"/> AMF <input type="checkbox"/> Folksam <input type="checkbox"/> Nordea Liv & Pension <input type="checkbox"/> SPP	<table border="0"> <tr> <td>           Traditional insurance  <input type="checkbox"/> Alecta  <input type="checkbox"/> AMF  <input type="checkbox"/> Folksam  <input type="checkbox"/> Nordea Liv &amp; Pension  <input type="checkbox"/> SPP         </td> <td>           Unit-linked insurance  <input type="checkbox"/> Handelsbanken Liv  <input type="checkbox"/> Länsförsäkringar  <input type="checkbox"/> Nordea Liv &amp; Pension  <input type="checkbox"/> SPP  <input type="checkbox"/> Swedbank Försäkring         </td> </tr> </table>	Traditional insurance <input type="checkbox"/> Alecta <input type="checkbox"/> AMF <input type="checkbox"/> Folksam <input type="checkbox"/> Nordea Liv & Pension <input type="checkbox"/> SPP	Unit-linked insurance <input type="checkbox"/> Handelsbanken Liv <input type="checkbox"/> Länsförsäkringar <input type="checkbox"/> Nordea Liv & Pension <input type="checkbox"/> SPP <input type="checkbox"/> Swedbank Försäkring
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## B. Repayment cover

<input type="checkbox"/> I would like repayment cover	<input type="checkbox"/> I do not want/I wish to cancel repayment cover
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**C. Family cover** - If you wish to choose family cover your must always complete both stage 1 and stage 2.

Stage 1 - choose 1 - 4 price amounts. Put one cross in the box	Stage 2 - choose the number of years over which payment should be made. Put one cross in the box.
<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> 5 <input type="checkbox"/> 15 <input type="checkbox"/> 10 <input type="checkbox"/> 20
<input type="checkbox"/> I do not want/I wish to cancel family cover	

**D. Health requirements** – if you choose repayment cover and/or family cover

**Family situation**  
 If in the last 12 months you have married, become a cohabitant or had a child, you can choose repayment cover and some levels of family cover without completing a health declaration. Read the information on the next page. If no family event has occurred over the past year, you should complete the health declaration below.

State the family event and fill in the date for the event.	<table border="1"> <tr> <td>married</td> <td>became a cohabitant</td> <td>had a child</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	married	became a cohabitant	had a child				<table border="1"> <tr> <td>year</td> <td>month</td> <td>day</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	year	month	day			
married	became a cohabitant	had a child												
year	month	day												

**Health declaration**  
 1. Have you received treatment/check-ups for any problems/symptoms, illness, injury or handicap during the past three years? ☐ Yes ☐ No  
 2. Have you been on the sick list for more than 30 consecutive days in the last three years? ☐ Yes ☐ No

NOTE! If you have replied "Yes" to any of the questions, you are to provide supplementary information in the form [Supplementary Information to your Health Declaration \(3940 En\)](#). The form can be down-loaded from [www.avtalat.se](http://www.avtalat.se). Please send the forms in together.

I am aware that incorrect or incomplete information can make the insurance invalid. I hereby give permission for information I have provided about my state of health to be communicated to the reinsurance company engaged by us..

**E. Signature** - The form will be treated as an original document, so it must be sent to us by mail. A form that reaches us more than 6 months after it is signed is not valid. Avtalat handles personal data according to the General Data Protection Regulation (GDPR) and the Swedish Data Protection Regulation.

Date (yyyy-mm-dd):	Signature:	Telephone (incl. area code):
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## How to fill in the ITP 1 choice form

Your employer pays premiums for a occupational pension. This pension is called ITP 1. If you have any questions, you are most welcome to call us. However, Avtalat does not provide advice as to the choice you should make in this context.

### If you are making a choice for the first time

When you send in the form for the first time, you must make a choice in section A, B or C – or several choices if you wish. You cannot return an empty form with a signature. That is not a valid choice. If you do not wish to make a choice, do not send in the form. In such case your money will be invested in a traditional insurance with Alecta with no repayment cover and family cover. You may add repayment cover and/or family cover whenever you wish. If so, you must complete a health declaration.

### A. Insurance provider

You choose an insurance provider and type of saving for your ITP 1 retirement pension in two stages. Stage 1: First you must always choose a traditional insurance for half of your ITP 1. Stage 2: Here you choose either traditional insurance or unit-linked insurance for the other half of your ITP 1 money, which you can divide into two items if you wish. This means that you can choose a maximum of three different investments and insurance companies for your occupational pension money. You may, of course, choose to place all your ITP 1 money in the same insurance company, but you still have to make the choice in two stages and half your ITP 1 must always be invested in a traditional insurance. If you choose unit-linked insurance in stage 2, the unit-linked insurance company will contact you during the next few months. You will then have an opportunity to choose the fund/funds in which you wish to invest your money.

Have you received an insurance statement from us with a reply date at the bottom? If this form reaches us before the reply date, all the money connected with this choice will be transferred to the insurance company/companies you choose. If you make a choice later, the money already paid in will be invested in a traditional insurance with Alecta.

### If you do not choose a company

If you do not wish to choose a company, or if you are satisfied with the company you have already chosen, go straight to section B and C. If you are making a choice for the first time and do not wish to choose a company or have repayment cover or family cover, do not return the form.

### If you wish to change

You can choose another company for your future payments whenever you wish. You may also transfer already earned ITP 1 to another company.

### B. Repayment cover

If you choose repayment cover, your family will receive your ITP 1 pension if you should die before the age of 65 or during the period the pension is in payment. You do not pay a fee, although you do incur a reduction of income. This is because you will not receive a share of the so-called inheritance gain, received by those who choose not to have a repayment cover. Choosing repayment cover thereby impacts the size of your future pension. The inheritance gain is relatively small up until the retirement age, but becomes larger after that point.

If you change your choice of repayment cover in the future, this change will apply to all your ITP 1 insurances within the same agreement area, if you have several insurance contracts, and also to premiums paid in previously.

### C. Family cover

Family cover is an extra pension that your family will receive if you should die before you retire. This cover is insured with Alecta and applies for as long as money is paid to your ITP 1. If you choose family cover for your ITP 1 you must also decide:

- how much should be paid to your family – one, two, three or four price base amounts\*
- the period over which the money should be paid – 5, 10, 15 or 20 years.

Depending on what you choose and your age, family cover costs different amounts.

### Reduction of payment period

The maximum payment period is generally 20 years. However, family cover cannot be paid out for a longer period than until the date when you would have reached the age of 70. So, if it is less than 20 years until the date of your 70th birthday, the maximum payment period is reduced in stages. The cost of family cover is deducted from payments to your ITP 1. If you are making a choice for the first time and leave this window blank, this means that you do not wish to have family cover. If you are not in active employment you cannot choose family cover.

\* The price base amount is set every year. For more information, please visit [avtalat.com](http://avtalat.com).

### D. Health requirements if you choose repayment cover and/or family cover

You must complete the health declaration when you

- choose family cover or increase the level of your family cover
- change your choice and add repayment cover later.

#### Family situation

If in the last 12 months you have married, become a cohabitant or had a child, special rules apply for the health declaration:

- If you add repayment cover, you do not need to complete the health declaration, simply specify the date of the family event.
- If you add family cover you can choose levels 1x5 (one price base amount for five years), 1x10 and 2x5 without completing a health declaration. Simply specify the date of the event instead. If, on the other hand, you choose a higher level of family cover you must both specify the date of the family event and complete the health declaration.

Repayment cover applies retroactively if you provide a date for a changed family situation or if your health declaration is approved. If you take the opportunity to specify a date for a family event because you have got married, and at the time suffer from an illness which subsequently causes your death within six months of the marriage, family cover will not be paid.

### E. Your signature is required to make your choice valid

Sign the form and send it to us by post. When we have received your form, we will register your choice and send you a confirmation. We assume no responsibility for the value development or impact on the value of the insurance arising due to the choice you make as regards your ITP or ITPK insurance.

If you have any questions, contact us on 0770-16 10 00 (from Sweden) or +46 10 38 34 010 (from abroad).